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**TRANSMITTAL  
FORM**

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<b>TRANSMITTAL FORM</b> to be used for all correspondence after initial filing)	Application Number	10/753,845
	Filing Date	January 8, 2004
	First Named Inventor	Michael O'Banion
	Art Unit	3724
	Examiner Name	Boyer D. Ashley
Total Number of Pages in This Submission	Attorney Docket Number	0275A-000505/USB

**ENCLOSURES (check all that apply)**

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <b>Return postcard</b>		
<table border="1"> <tr> <td>Remarks</td> <td>The Commissioner is hereby authorized to charge any additional fees that may be required under 37 CFR 1.16 or 1.17 to Deposit Account No. 08-0750. A duplicate copy of this sheet is enclosed.</td> </tr> </table>			Remarks	The Commissioner is hereby authorized to charge any additional fees that may be required under 37 CFR 1.16 or 1.17 to Deposit Account No. 08-0750. A duplicate copy of this sheet is enclosed.
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**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual name	Harness, Dickey & Pierce, P.L.C.	Attorney Name	Brian D. Hollis	Reg. No.	51,075
Signature					
Date	May 10, 2005				

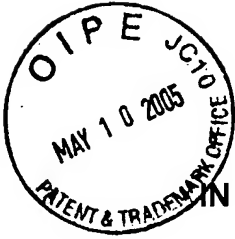
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Signature		Date	May 10, 2005

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**PATENT**

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No.: 10/753,845  
Filing Date: January 8, 2004  
Applicant: Michael O' Banion et al.  
Group Art Unit: 3724  
Examiner: Boyer D. Ashley  
Title: POWER TOOL SAFETY MECHANISMS  
Attorney Docket: 0275A-000505/USB

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**RESPONSE TO RESTRICTION REQUIREMENT**

Sir:

In response to the Office Action mailed April 14, 2005, please consider the remarks set forth below.

**Remarks** begin on page 2 of this paper.